

## Proposal for *Airport Program Manual* Change

Name:

Affiliation:

Email:

Phone:

Date:

Airport role:

**Issue** Identify the policy, procedure, or situation that created your concern. Describe why a change is needed. Provide *Airport Program Manual* references as appropriate.

**Analysis** Provide information on your proposed solution, including benefits and implementation costs. Address the system-wide impacts of the proposed solution.

**Alternatives** Describe alternatives or solutions to address your concern.

**Proposed Recommendation** Provide a recommendation for action and a schedule for implementation.

Submit the form to the Virginia Department of Aviation at least 30 days prior to a committee meeting by mail to Airport Services Division, 5702 Gulfstream Road, Richmond, 23250, by fax to 804-236-3634, or by email to [cliff.burnette@doav.virginia.gov](mailto:cliff.burnette@doav.virginia.gov).

Administrative use only: reference \_\_\_\_\_